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Bib Data Sheet

CONFIRMATION NO. 6210

SERIAL NUMBER 09/733,041	FILING DATE 12/11/2000  RULE	CLASS 239	GROUP ART UNIT 3752	ATTORNEY DOCKET NO. 108121
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## APPLICANTS

Jean Francois Benoist, Lagny Sur Marne, FRANCE;

\*\* CONTINUING DATA \*\*\*\*\* *NONE yet*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

FRANCE 99 15885 12/16/1999 *7/15/05*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 01/22/2001

Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	STATE OR	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after allowance <i>7/15/05</i>	COUNTRY	DRAWING	CLAIMS	CLAIMS
Verified and Acknowledged <i>[Signature]</i> Examiner's Signature Initials	FRANCE	1	22	1

## ADDRESS

Oliff & Berridge PLC  
 P. O. Box 19928  
 Alexandria, VA  
 22320

## TITLE

Nozzle for an aerosol receptacle

FILING FEE  RECEIVED 1182	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____
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<b>SERIAL NUMBER</b> 09/733,041	<b>FILING DATE</b> 12/11/2000 <b>RULE</b>	<b>CLASS</b> 401	<b>GROUP ART UNIT</b> 3751	<b>ATTORNEY DOCKET NO.</b> 108121						
<b>APPLICANTS</b> Jean Francois Benoist, Lagny Sur Marne, FRANCE; <b>** CONTINUING DATA *****</b> <i>None rol</i> <b>** FOREIGN APPLICATIONS *****</b> <i>Yes rol</i> FRANCE 99 15885 12/16/1999 <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 01/22/2001</b>										
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<b>ADDRESS</b> Oliff & Berridge PLC P. O. Box 19928 Alexandria, VA 22320										
<b>TITLE</b> Nozzle for an aerosol receptacle										
<b>FILING FEE RECEIVED</b> 876	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: <table border="1"> <tr><td><input type="checkbox"/> All Fees</td></tr> <tr><td><input type="checkbox"/> 1.16 Fees ( Filing )</td></tr> <tr><td><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )</td></tr> <tr><td><input type="checkbox"/> 1.18 Fees ( Issue )</td></tr> <tr><td><input type="checkbox"/> Other _____</td></tr> <tr><td><input type="checkbox"/> Credit</td></tr> </table>				<input type="checkbox"/> All Fees	<input type="checkbox"/> 1.16 Fees ( Filing )	<input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )	<input type="checkbox"/> 1.18 Fees ( Issue )	<input type="checkbox"/> Other _____	<input type="checkbox"/> Credit
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